



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants:	Donnelly, et al.		
Serial No.:	09/835,694	Case No.:	18972PCA
Filed:	April 16, 2001		
For:	NUCLEIC ACID VACCINES AGAINST HUMAN INFLUENZA VIRUS (As amended herein)		

Art Unit: 1636

Examiner:
Ketter, James S.

MAIL STOP: PETITION
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Attn: Ms. Karen Creasy

**RENEWED PETITION UNDER 37 C.F.R.
§1.78(a)(3) TO ACCEPT AN
UNITINTENTIONALLY DELAYED PRIORITY
CLAIM UNDER 35 U.S.C. § 120**

CERTIFICATE OF MAILING UNDER 37 C.F.R. 1.8(e)

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING
DEPOSITED WITH THE UNITED STATES POSTAL SERVICE AS
FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO:

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ON THE DATE APPEARING BELOW.

BY: J. Marshall
DATE 20 Dec. 2005

Sir:

This Renewed Petition is entered in response to the DECISION ON PETITION
UNDER 37 C.F.R. §1.78(a)(3), mailed 25 July 2005.

(1) Please charge the fee under 37 C.F.R. 1.17(t) to Deposit Account No. 13-2755 as
a large entity.

(2) The delay between the date the claim was due under 37 C.F.R. § 1.78(a)(2)(ii)
and the date of entry of the First Petition and this Renewed Petition was unintentional.

Adjustment date: 08/09/2006 CRHLUR
12/23/2005 SSESHE1 00000025 132755 09835694
01 FC:1464 130.00 CR

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12/23/2005 SSESHE1 00000025 132755
01 FC:1464 130.00 CR

DHC
JFL

MISC. FEE TRANSMITTAL		<i>Complete if Known</i>	
		Application Number	09/835,694
		Filing Date	April 16, 2001
		First Named Inventor	Donnelly et al.
		Examiner Name	James S. Ketter
		Group Art Unit	1636
		Attorney Docket Number	18972PCA
TOTAL AMOUNT OF PAYMENT		\$130	

METHOD OF PAYMENT

Deposit Account

Deposit Account Number **13-2755**

Deposit Account Name **Merck & Co., Inc.**

The Director is authorized to:

Charge fee(s) indicated below

Credit any overpayments

Charge any additional fee(s) or underpayments of fee(s)
under 37 CFR 1.16 and 1.17

FEE CALCULATION

FEES

Large Entity

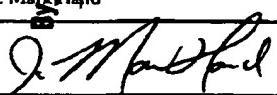
Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	Surcharge - late filing fee or oath	
1051	130	Non-English Specification	
1812	2,520	For filing a request for <i>ex parte</i> reexamination	
1402	500	Filing a brief in support of an appeal	
1452	500	Petition to revive - unavoidable	
1453	1,500	Petition to revive - unintentional	
1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	Submission of Information Disclosure Statement	
1809	790	Filing a submission after final rejection (37 CFR 1.129(a))	
	790	For each additional invention to be examined (37 CFR 1.129(b))	
	130	Statutory Terminal Disclaimer under 37 CFR 1.321	
Other fee (specify)		Renewed Petition37CFR1.78(a)(3) to Accept an Unintentionally Under 35 USC 120	130
Other fee (specify)			

TOTAL **\$130**

I hereby certify that this correspondence is being transmitted with the United States Postal Service as first class mail in an envelope addressed to:
Commissioner for Patents, P.O. Box 1450,
Alexandria, Virginia 22313-1450, on the date
appearing below.

MERCK & CO., INC.

Date: **20 Dec 2005**

SUBMITTED BY			<i>Complete (if applicable)</i>	
Type or Print Name Name as it appears on patent application	J. Mark Hand		Reg. Number	36,545
Signature		Date	20 Dec 2005	Deposit Account User ID

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: 08/07/06		2 Serial/Patent # 09/835,694									
3 Please refund the following fee(s):			4 PAPER NUMBER	5 DATE FILED	6 AMOUNT						
	Filing				\$						
	Amendment				\$						
	Extension of Time				\$						
	Notice of Appeal/Appeal				\$						
X	Petition		12/22/05	\$	130.00						
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
			7 TOTAL AMOUNT OF REFUND	\$ 130.00							
8 TO BE REFUNDED BY:											
10 REASON:			Treasury Check								
	Overpayment	X	Credit Deposit A/C #:								
	Duplicate Payment		9	1	3	--	2	7	5	5	
X	No Fee Due (Explanation): fee not necessary										
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <i>A. Au</i>			TITLE: Pet. Exam								
SIGNATURE: <i>A. Au</i>			PHONE: 7414								
OFFICE: <i>OP</i>											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY *****											
APPROVED: <i>CKH</i>			DATE: <i>8/9/06</i>								

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

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Crystal Park One, Room 802B